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|---|------------------------|------------------------|
| REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS | Application Number | 10/709,903-Conf. #3902 |
| | Filing Date | June 4, 2004 |
| | First Named Inventor | Charles F. Harris, Jr. |
| | Art Unit | 3772 |
| | Examiner Name | Jackson, Brandon Lee |
| | Attorney Docket Number | 11755-00003-US |

To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Please withdraw me as attorney or agent for the above identified patent application, and

all the attorneys/agents of record.
 the attorneys/agents (with registration numbers) listed on the attached paper(s), or
 the attorneys/agents associated with Customer Number 23416

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are:

Client has repeatedly failed to pay past due balance for work associated with the above application after multiple requests over a time period exceeding one year.

CORRESPONDENCE ADDRESS

1. The correspondence address is NOT affected by this withdrawal.
2. Change the correspondence address and direct all future correspondence to:

The address associated with Customer Number:

OR

| | | | |
|---|--|-------|------------------|
| <input checked="" type="checkbox"/> Firm or Individual Name | Wristband Enterprises LLC | | |
| Address | 20 Christian Woods Court | | |
| City | Newark | State | DE |
| Country | US | | |
| Telephone | (302) 377-4105 | Email | |
| Signature |  | | |
| Name | Patricia Smink Rogowski | | Registration No. |
| Date | February 19, 2007 | | Telephone No. |

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.